Form 3160-5 (November 1994)

1. Type of Well Oil Well

3a. Address

2. Name of Operator

X Other

determined that the final site is ready for final inspection.)

KCS Medallion Resources, Inc.

M'IM' OII AAIIA: -**NITED STATES** DEPAR. LENT OF THE INTERIOR 11 S. 1st Str BUREAU OF LAND MANAGEMEN Artesia, NM 88210-283

FORM APPROVED Budget Bureau No. 1004-0135 Expires November 30, 2000

6. If Indian, Allottee or Tribe Name

5. Lease Serial No. E/2 NM067896

NMNM101380

Federal #2

9. API Well No

30 015 30501

Saltwater Disposal

3b. Phone No. (include area code)

8. Well Name and No.

West Shugart 19

SUNDRY NOTICES AND REPORTS ON WELLS
o not use this form for proposals to drill or to re-enter an

De abandoned well. Use Form 3160-3 (APD) for such proposals.

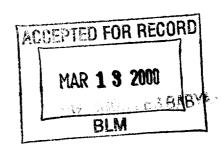
SUBMIT IN TRIPLICATE - Other instructions on reverse side

7. If Unit or CA/Agreement, Name and/or No.

7130 South Lewis, Ste. 700 Tulsa, C	K 74136-5489 ((918) 491-4137	10. Field and Pool, or Exploratory Area
4. Location of Well (Footage, Sec., T., R., M., or Survey Descrip	ption)	North Shugart
Sec.19, T18S, R31E		96100 SWP DelaworF
660 ' FSL & 1930' FEL		11. County or Parish, State
		Eddy NM
12. CHECK APPROPRI	ATE BOX(ES) TO INDICATE NATURE OF NOT	CE, REPORT, OR OTHER DATA
TYPE OF SUBMISSION	TYPE	OF ACTION
Notice of Intent	X Acidize Deepen	Production (Start/Resume) Water Shut-Off
X Subsequent Report Final Abandonment Notice	Alter Casing Fracture Treat Casing Repair New Construction Change Plans Plug and Abandon Convert to Injection Plug Back	Reclamation Well Integrity Recomplete Other Temporarily Abandon Water Disposal
If the proposal is to deepen directionally or recomp Attach the Bond under which the work will be per following completion of the involved operations. If	lete horizontally, give subsurface locations and measurer formed or provide the Bond No. on file with BLM/BL the operation results in a multiple completion or recom- otices shall be filed only after all requirements, includ-	date of any proposed work and approximate duration thereof. i and true vertical depths of all pertinent markers and zones. A. Required subsequent reports shall be filed within 30 days pletion in a new interval, a Form 3160-4 shall be filed once ing reclamation, have been completed, and the operator has

3/02/00 - Pumped 2520 gals 15% HCL acid w/additives, avg treating press 1485 psi @ .44 bpm, flush w/38 bbls field salt water, avg press 1425 psi @ .44 bpm. ISIP 1360 psi, 5 min 1314 psi, 10 min 1277 psi. 15 min 1250 psi. Start disposal pump, well in service, injecting @ 1325 psi w/rate of 2400 bbls/day.





14. I hereby certify that the foregoing is true and correct Name (Printed/Typed) Kaye Alley	Title Production Technician		
	Date 3/03/00		
THIS SPACE	FOR FEDERAL OR STATE OFFICE US	E	
Approved by	Title	Date	
Conditions of approval, if any, are attached. Approval of this notice certify that the applicant holds legal or equitable title to those rights which would entitle the applicant to conduct operations thereon	does not warrant or office in the subject lease		

Title 18 U.S.C. Section 1001, makes it a crime for any person knowingly and willfully to make to any department or agency of the United States any false, fictitious or fraudulent statements or representations as to any matter within its jurisdiction.